

Appendix II Test 1

Help For All, Inc.

Schedules tested within Form 20C:

Schedule A

Schedule B

Schedule C

Schedule D-1

Schedule E

Schedule F

Other Information

Required Attachments:

AL8453C.pdf

NOL_1998_AL20CPg1.pdf

NOL_1999_AL20CPg1.pdf

SchD1OtherProperty.pdf

EnterpriseZoneCredit.pdf

EmployerEducationCredit.pdf

IncomeTaxCredit.pdf

TaxIncrementFundPaymentCredit.pdf

CoalTaxCredit.pdf

CapitalTaxCredit.pdf (This pdf should include
Form AR and Form K-RCC)

Federal1120.pdf



For the year January 1 – December 31, 2006, or other tax year beginning _____, 2006, ending _____.

Check applicable box: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change	FEDERAL BUSINESS CODE NUMBER ▶ 313000		FEDERAL EMPLOYER IDENTIFICATION NUMBER ▶ 11-0000001	
	NAME ▶ Help For All, Inc.			
	ADDRESS ▶ 31 Any Street			
	CITY, STATE, COUNTRY (IF NOT U.S.) ▶ Anytown, MD		9-DIGIT ZIP CODE ▶ 78621-0000	
	STATE OF INCORPORATION ▶ DE	DATE OF INCORPORATION 05/30/1983	DATE QUALIFIED IN ALABAMA 04/15/1997	NATURE OF BUSINESS IN ALABAMA Textile Mills
	Check Applicable: <input type="checkbox"/> This company files as part of a consolidated federal return. Common parent corporation: (See page 4, "Other Information," item 5.) ▶ Name FEIN			
<input type="checkbox"/> Notification of Final IRS change		<input type="checkbox"/> Federal Form 1120-REIT filed		<input type="checkbox"/> 7004 Attached

Filing Status: (see instructions)
☐ 1. Corporation operating only in Alabama.
☒ 2. Multistate Corporation – Apportionment (Sch. D-1).
☐ 3. Multistate Corporation – Percentage of Sales (Sch. D-2).
☐ 4. Multistate Corporation – Separate Accounting (Prior written approval required and must be attached).
☐ 5. Alabama Consolidated Return.
(Caution: see instructions)

ATTACH CHECK OR MONEY ORDER HERE

1	FEDERAL TAXABLE INCOME (see instructions)	1	138,938,859				
2	Federal Net Operating Loss (included in line 1)	2	0				
3	Reconciliation adjustments (from line 25, Schedule A)	3	27,839				
4	Federal taxable income adjusted to Alabama Basis (add lines 1, 2 and 3)	4	138,966,698				
5	Net nonbusiness (income)/loss – Everywhere (from Schedule C, line 2, col. E)	5	(475,195)				
6	Apportionable income (add lines 4 and 5)	6	138,491,503				
7	Alabama apportionment factor (from line 26, Schedule D-1)	7	0.1764	%			
8	Income apportioned to Alabama (multiply line 6 by line 7)	8	24,429,901				
9	Net nonbusiness income/(loss) – Alabama (from Schedule C, line 2, col. F)	9	376,011				
10	Alabama income before federal income tax deduction (line 8 plus line 9)	10	24,805,912				
11	Federal income tax deduction/(refund) (from line 7, Schedule E)	11	7,962,164				
12	Alabama income before net operating loss (NOL) carryforward (line 10 less line 11)	12	16,843,748				
13	Alabama NOL deduction (see instructions)	13	27,979				
14	Alabama taxable income (line 12 less line 13)	14	16,815,769				
15	Alabama Income Tax:	CN					
a	Income Tax (6.5% of line 14 or Schedule D-2, line 4)	15a	11,093,025				
b	Consolidated Filing Fee (Schedule G)	15b	0				
c	Total Tax (add lines 15a and 15b)	15c	11,093,025				
16	Tax Payments, Credits, and Deferral:	<div>UNLESS A COPY OF THE FEDERAL RETURN IS ATTACHED, THIS RETURN WILL BE CONSIDERED INCOMPLETE. (SEE ALSO PAGE 4, OTHER INFORMATION, NO. 5.)</div>					
a	Carryover from prior year (2005)				16a	292,000	
b	2006 estimated tax payments				16b	9,700,000	
c	2006 composite payment(s) made on behalf of this entity (see instructions) ... Paid by _____ FEIN _____				16c	0	
d	Payments made with extension (Form 20E)				16d	650,000	
e	Payments prior to adjustment				16e	0	
f	Credits (from line 7, Schedule F)				16f	199,281	
g	LIFO Reserve Tax Deferral (see instructions)				16g	0	
h	Total Payments, Credits, and Deferral (add lines 16a through 16g)	16h	10,841,281				
17	Reductions/applications of overpayments						
a	Credit to 2007 estimated tax	17a					
b	Penny Trust Fund	17b	0				
c	Penalty due (see instructions)	17c	0				
d	Interest due (computed on tax due only)	17d	0				
e	Total reductions (total lines 17a, b, c and d)	17e	0				
18	Total amount due/(refund) (line 15c less 16h, plus 17e)	18	251,744				
19	Enter amount of check or money order attached to this return (enter zero if paid by EFT, E-check or credit card)	19	0				
a Indicate payment type: <input checked="" type="checkbox"/> EFT <input type="checkbox"/> E-check <input type="checkbox"/> Credit Card <input type="checkbox"/> Check or money order attached							

Please
Sign
Here

☒ I authorize a representative of the Department of Revenue to discuss my return and attachments with my preparer.
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

▶ **Roger Rabbit**

Chief Executive Officer

▶ 01/25/2007 | (703) 555-1212

Signature

Title

Date

Daytime Telephone No.

Paid
Preparer's
Use OnlyPreparer's
signature **Johnny Appleseed**Date
01/20/2007Check if
self-employed ☒Preparer's Social Security Number
999 06 0007Firm's name (or yours,
if self-employed)
and address**Electronic Tax Filers, Inc.**
100 Efile Drive, Anytown, Tx

Tel. No. (512) 555-1212

E.I. No. ▶ 11-0000011

ZIP Code ▶ 78621

**Schedule C****Allocation of Nonbusiness Income, Loss, and Expense – Use only if you checked Filing Status 2, page 1**

Identify by account name and amount, all items of nonbusiness income, loss and expense removed from apportionable income and those items which are directly allocable to Alabama. **Adjustment(s) must also be made for any proration of expenses under Alabama Income Tax Rule 810-27-1-4-.01**, which states, "Any allowable deduction that is applicable to both business and nonbusiness income of the taxpayer shall be prorated to each class of income in determining income subject to tax as provided..." (See instructions.)

	ALLOCABLE GROSS INCOME / LOSS		RELATED EXPENSE		NET OF RELATED EXPENSE	
	Column A Everywhere	Column B Alabama	Column C Everywhere	Column D Alabama	Column E Everywhere	Column F Alabama
1a Stock sale	248,935	233,347	81,336	72,214	167,599	161,133
b Rental Inc	187,584	143,243	13,460	12,102	174,124	131,141
c LT Cap GN	52,924	40,283	10,137	9,215	42,787	31,068
d ST Cap GN	49,748	26,403	595	338	49,153	26,065
e Dividend	45,251	28,266	3,719	1,662	41,532	26,604
2 NET NONBUSINESS INCOME / LOSS	Enter Column E total ((income)/loss) on line 5 of page 1. Enter Column F total ((income)/(loss)) on line 9 of page 1 ▶				Column E 475,195	Column F 376,011

Schedule D-1**Apportionment Factor Schedule – Use only if you checked Filing Status 2, page 1**

TANGIBLE PROPERTY AT COST FOR PRODUCTION OF BUSINESS INCOME	ALABAMA		EVERYWHERE	
	BEGINNING OF YEAR	END OF YEAR	BEGINNING OF YEAR	END OF YEAR
1 Inventories	381,669	309,266	161,780,575	72,667,144
2 Land	900,052	107,106	237,820,649	137,276,219
3 Furniture and fixtures	320,642	37,966	156,586,950	112,151,568
4 Machinery and equipment	1,113,606	1,159,079	2,290,810,892	2,232,288,544
5 Buildings and leasehold improvements	2,962,771	448,483	1,529,747,290	1,265,617,445
6 IDB/IRB property (at cost)	250,090	246,023	320,642	315,926
7 Government property (at FMV)	393,125	313,142	521,393	324,133
8 Tools	71,338	94,193	199,413	319,005
9 Less Construction in progress (if included)	7,727	89,454	129,613,160	200,665,252
10 Totals	6,401,020	2,804,712	4,507,400,964	4,021,625,236
11 Average owned property (BOY + EOY ÷ 2)		4,602,866		4,264,513,100
12 Annual rental expense	251,599 x8 =	2,012,792	13,554,435 x8 =	108,435,480
13 Total average property (add line 11 and line 12)	13a	6,615,658	13b 4,372,948,580
14 Alabama property factor — 13a ÷ 13b = line 14			14 ▶	0.1512%
SALARIES, WAGES, COMMISSIONS AND OTHER COMPENSATION RELATED TO THE PRODUCTION OF BUSINESS INCOME		15a ALABAMA	15b EVERYWHERE	15c
15 Alabama payroll factor — 15a ÷ 15b = 15c		4,748,592	1,270,753,596	▶ 0.3737%
SALES		ALABAMA	EVERYWHERE	
16 Destination sales (see instructions)		17,423,222		
17 Origin sales (see instructions)		2,877,324		
18 Total gross receipts from sales		20,300,546	5,050,433,092	
19 Dividends		91,231	132,197	
20 Interest		75,200	100,257	
21 Rents		1,510,778	32,791,781	
22 Royalties		87,700	102,433	
23 Gross proceeds from capital and ordinary gains		13,219	80,164	
24 Other Income (Federal 1120, line 10)		1,162,558	375,018,745	
25 Alabama sales factor — 25a ÷ 25b = line 25c	25a	23,241,232	25b 5,458,658,669	25c ▶ 0.0043%
26 Sum of lines 14, 15c, and 25c ÷ 3 = ALABAMA APPORTIONMENT FACTOR (Enter here and on line 7, page 1)			26 ▶	0.1764%

Schedule D-2**Percentage of Sales – Use only if you checked Filing Status 3, page 1 – See instructions**

DO NOT USE THIS SCHEDULE IF ALABAMA SALES EXCEED \$100,000.

	ALABAMA	EVERYWHERE
1 Destination Sales		
2 Origin Sales		
3 Total gross receipts from sales		
4 Tax due (multiply line 3, Alabama by .0025) (enter here and on page 1, line 15a)		

**Schedule E****Federal Income Tax (FIT) Deduction/(Refund)**

(a) If this corporation is an accrual-basis taxpayer and files a separate (nonconsolidated) federal income tax return with the IRS, enter on line 1 below the amount of federal income tax liability shown on Form 1120. Cash-basis taxpayers filing separate (nonconsolidated) federal returns should enter on line 1 below the amount of federal income tax actually paid during the year.

(b) If this corporation is a member of an affiliated group which files a

consolidated federal return, indicate the number of the election made under IRC §1552.

☐ 1552(a)(1) ☐ 1552(a)(2) ☐ 1552(a)(3)

☐ No Election Made ☐ Other _____

Attach a copy of the common parent corporation's current 1552 election letter.

Enter on line 1 the amount of the consolidated tax liability allocated to this corporation under the method indicated above. Ignore any supplemental elections under IRC §1502. **Attach a schedule of your computations.**

1	Federal income tax deduction to be apportioned	1	44,976,265
2	Alabama income before FIT deduction (from line 10, page 1)	2	24,805,912
3	Federal taxable income adjusted to Alabama basis (from line 4, page 1)	3	138,966,698
4	Federal income tax apportionment factor (line 2 divided by line 3)	4	0.1785 %
5	Federal income tax deduction apportioned to Alabama (multiply line 1 by line 4)	5	8,028,263
6	Refund of federal income tax deducted in prior year(s) (see instructions)	6	66,099
7	NET FEDERAL INCOME TAX DEDUCTION / (REFUND) (subtract line 6 from line 5). Enter here and on line 11, page 1	7	7,962,164

Schedule F**Credits/Exemptions Caution – See Instructions**

1	Alabama Enterprise Zone Credit/Exemptions	1	68,661
2	Employer Education Credit	2	18,729
3	Income Tax Credit	3	45,059
4	Tax Increment Fund Payment Credit	4	14,890
5	Coal Tax Credit	5	21,516
6	Capital Tax Credit (Project Number(s) 2002173001,)	6	30,426
7	TOTAL (add lines 1 through 6). Enter here and on line 16f, page 1	7	199,281

Schedule G**Consolidated Filing Fee**

Complete this schedule if the corporation has elected to file a consolidated return for Alabama. The election is made by filing Form 20C-CRE on or before the due date of the return, including extensions, for the first taxable year for which the election is made.

For tax periods beginning after December 31, 1998, an Alabama affiliated group may elect to file an Alabama consolidated return. Refer to §40-18-39(c)(1), **Code of Alabama 1975**. (See instructions.)

Total Assets of**Affiliated Group****Annual Fee**

\$0 to \$2,500,000	\$ 5,000
\$2,500,001 to \$5,000,000	\$10,000
\$5,000,001 to \$7,500,000	\$15,000
\$7,500,001 to \$10,000,000	\$20,000
\$10,000,001 and over	\$25,000

Consolidated Filing Fee. (Enter here and on Line 15b, page 1) _____

(Note: Total assets are those assets indicated on page one of the Federal Form 1120.)

If income from a taxpayer was reported on this return and an Alabama business privilege tax return was filed for the taxpayer under a FEIN different from the one listed on this return, please enter the name and FEIN reported on the Alabama business privilege tax return for each such taxpayer (attach listings as needed):

Name	FEIN

Mail to: Alabama Department of Revenue
Individual and Corporate Tax Division
Corporate Tax Section
PO Box 327430
Montgomery, AL 36132-7430

Other Information

- Briefly describe your Alabama operations. Textile mills
- List locations of property within Alabama (cities and counties).
Alexander City, Andalusia, Enterprise
- List other states in which corporation operates, if applicable. _____
MD, TX,
- Indicate your tax accounting method:
☒ Accrual ☐ Cash ☐ Other _____
- If this corporation is a member of an affiliated group which files a consolidated federal return, the following information **must be provided**:
 - Copy of Federal Form 851, Affiliations Schedule.** Identify by asterisk or underline the names of those corporations subject to tax in Alabama.
 - Copy of the spreadsheet of the income statements** for EVERY corporation in the consolidated group.
 - Copy of consolidated Federal Form 1120, pages 1-4**, as filed with the IRS.
- Enter this corporation's federal net income (see instructions for page 1, line 1) for the last three (3) years, as last determined (e.g.: per amended federal return or IRS audit).
2005 6,272,210 2004 5,201,156 2003 346,364,576
- Check if currently being audited by the IRS. ☒
- Location of the corporate records:
Street address: 31 Any Street
City: Anytown, State: MD ZIP: 78621
- Person to contact for information concerning this return:
Name: Johnny Appleseed
Telephone: (512) 555-1212

FORM
AL8453-C

ALABAMA DEPARTMENT OF REVENUE
INDIVIDUAL & CORPORATE TAX DIVISION

2006

**Corporation/Partnership
Income Tax Declaration for Electronic Filing**

To be filed electronically with the company's tax return. Do not send paper copies.

For calendar year 2006, or tax year beginning 1/1, 2006, ending 12/31, 2006

NAME OF COMPANY Help For All, Inc.	FEDERAL EMPLOYER IDENTIFICATION NUMBER 11-0000001
ADDRESS OF COMPANY 31 Any Street	TELEPHONE NUMBER (703) 555-1212
Anytown, MD 78621 0000	

PART I Tax Return Information (*Whole Dollars Only*)

1 Alabama taxable income (Form 20C, line 14); or Non Separately Stated Income (Forms 20S/65, line 20)	1	16,815,769
2 Total tax liability (Form 20C, line 15c; Form 20S, line 21)	2	11,093,025
3 Total payments and credits (Form 20C, line 16h; Form 20S, line 22c)	3	10,841,281
4 Refund (negative number reported on Form 20C, line 18; Form 20S, line 27)	4	0
5 Amount you owe (positive number reported on Form 20C, line 18; Form 20S, line 27) ...	5	251,744
6 Amount of payment remitted electronically	6	251,744

PART II Declaration of Officer (*Sign only after Part I is completed.*)

Under penalties of perjury, I declare that I am an officer of the above company and that the information I have given my electronic return originator (ERO), transmitter, and/or intermediate service provider (ISP) and the amounts in Part I above agree with the amounts on the corresponding lines of the company's 2006 Alabama income tax return. To the best of my knowledge and belief, the company's return is true, correct, and complete. I consent to my ERO, transmitter, and/or ISP sending the company's return, this declaration, and accompanying schedules and statements to the Alabama Department of Revenue. I also consent to the Alabama Department of Revenue sending my ERO, transmitter, and/or ISP an acknowledgment of receipt of transmission and an indication of whether or not the company's return is accepted, and, if rejected, the reason(s) for the rejection.

☒ I authorize a representative of the Department of Revenue to discuss my return and attachments with my preparer.

Sign Here	Roger Rabbit	03/15/2007	Chief Executive Officer
	Signature of Officer	Date	Title

PART III Declaration of Electronic Return Originator (ERO) and Paid Preparer (*See Instructions*)

I declare that I have reviewed the above company's return and that the entries on Form AL8453-C are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The company's officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the Alabama Department of Revenue, and have followed all other requirements in Pub. 3112, IRS e-file Application and Participation, and Pub. 4163, Modernized e-File Information for Authorized IRS e-file Providers and Pub. 4164 Software Developers and Transmitters Guidelines and Schemas for Alabama Corporation and Partnership Income Tax Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above company's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature Johnny Appleseed	Date 03/15/2007	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input checked="" type="checkbox"/>	ERO's SSN or PTIN 999060007
	Firm's name (or yours if self-employed), address and ZIP code Electronic Tax Filers, Inc.	EIN 110000011		Phone No. (512) 555-1212	
	100 Efile Drive, Anytown, Tx 78621				

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Paid Preparer's Use Only	Preparer's signature Johnny Appleseed	Date 03/15/2007	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN or PTIN 999060007
	Firm's name (or yours if self-employed), address and ZIP code Electronic Tax Filers, Inc.	EIN 110000011		Phone No. (512) 555-1212
	100 Efile Drive, Anytown, Tx 78621			

ALABAMA DEPARTMENT OF REVENUE
Corporation Income Tax ReturnCY ☒
FY ☐
SY ☐

1998

For the year January 1 – December 31, 1998, or other tax year beginning _____, 1998, ending _____, 19____

▶ Important	FEDERAL BUSINESS CODE NUMBER 313000		FEDERAL EMPLOYER IDENTIFICATION NUMBER 110000001	
	NAME ▶ Help For All, Inc.			
	ADDRESS ▶ 31 Any Street			
	CITY, STATE, COUNTRY (IF NOT U.S.) ▶ Anytown, MD		9-DIGIT ZIP CODE ▶ 78621-0000	
	STATE OF INCORPORATION ▶ DE		DATE OF INCORPORATION 05/30/1983	DATE QUALIFIED IN ALABAMA 04/15/1997
Check applicable box: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return	NATURE OF BUSINESS IN ALABAMA Textile Mills		If you filed a return for 1997 and the above address is different, check here <input type="checkbox"/>	
	Does this company file as part of a consolidated Federal return? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, enter name and FEIN of common parent corporation.			
	▶ Name ▶ FEIN			
Filing Status: (see instructions)				
1. <input type="checkbox"/> Corporation operating only in Alabama				
2. <input checked="" type="checkbox"/> Multistate Corporation – Apportionment				
3. <input type="checkbox"/> Multistate Corporation – Percentage of Sales				
4. <input type="checkbox"/> Multistate Corporation – Separate (Direct) Accounting (Prior written approval required)				
Will this corporation file as an S Corporation with the IRS next year? ▶ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Was federal form 1120-REIT filed? ▶ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
DEPARTMENT USE ONLY				
ADDITIONAL TAX _____				
PENALTY/INT. _____				
DATE _____				
REFUND _____				
REV. BY _____				

ATTACH CHECK OR MONEY ORDER HERE

1	FEDERAL TAXABLE INCOME before net operating loss and special deductions	▶	1	-193,030				
2	Reconciliation adjustments to Alabama basis (from line 37, Schedule A)	▶	2					
3	Total net income adjusted to Alabama basis (add lines 1 and 2) If you operated only in Alabama, omit lines 4 through 10c, and enter this amount on line 11	▶	3	-193,030				
4	Net nonbusiness (income)/loss (from Column E, Schedule C)	▶	4					
5	Special deductions (from line 10c below)	▶	5					
6	Apportionable income (add lines 3, 4, and 5)	▶	6	-193,030				
7	Alabama apportionment factor (from line 26, Schedule D-1)	▶	7	50.0000 %				
8	Income apportioned to Alabama (multiply line 6 by line 7)	▶	8	-96,515				
9	Net nonbusiness income/(loss) (from Column F, Schedule C)	▶	9					
10	Special deductions:		CN					
	a Pollution control deduction (from line 4, Schedule B)	▶	10a					
	b Expense of removing barriers to the handicapped from property in Ala.	▶	10b					
	c Total special deductions (add lines 10a and 10b)	▶	10c					
11	Alabama income before federal income tax deduction (line 8 plus line 9 less line 10c)	▶	11	-96,515				
12	Federal income tax deduction /(refund) (from line 7, Schedule E)	▶	12					
13	Alabama income before net operating loss (NOL) carryforward (line 11 less line 12)	▶	13	-96515.				
14	Alabama NOL deduction (Do not exceed line 13 – attach schedule)	▶	14					
15	Alabama taxable income (line 13 less line 14)	▶	15	-96,515				
16	ALABAMA INCOME TAX (multiply line 15 by 5% or from line 4, Schedule D-2)	▶	16					
17	Tax Payments, Credits, Exemptions, and Deferral:		UNLESS A COPY OF THE FEDERAL RETURN IS ATTACHED, THIS RETURN IS INCOMPLETE					
	a 1998 estimated tax payments and amounts applied from 1997 return	▶				17a		
	b Payments made with extension	▶				17b		
	c Payments prior to adjustment (see instructions)	▶				17c		
	d Credits/Exemptions (from line 7, Schedule F)	▶				17d		
	e LIFO Reserve Tax Deferral (see instructions)	▶				17e		
	f Total Payments, Credits, and Deferral (add lines 17a, 17b, 17c, 17d, and 17e)	▶	17f					
18	NET TAX DUE (subtract line 17f from line 16)	▶	18					
19	OVERPAYMENT (subtract line 16 from line 17f)	▶	19					
	a Amount to be credited to 1999 estimated tax	▶	19a					
	b Contribution to Penny Trust Fund	▶	19b					
	c Amount to be refunded	▶	19c					
	(DEPARTMENT USE ONLY)							
20	Penalty for late filing and/or late payment (see instructions)	▶	20					
21	Interest due (Internal Revenue Code rate from unextended due date)	▶	21					
22	TOTAL AMOUNT DUE (add lines 18, 20, and 21)	▶	22					
23	AMOUNT REMITTED WITH THIS RETURN	▶	23					
	a If payment made through Electronic Funds Transfer (EFT), check this box	▶						

Please
Sign Here

UNDER PENALTIES OF PERJURY, I declare that I have examined this return and accompanying schedules and statements and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your Signature **Roger Rabbit**Title **Chief Executive Officer**Date **3/15/1999**Paid
Preparer's
Use OnlyPreparer's signature **Johnny Applesseed**
Firm's name (or yours, if self-employed) and address **Electronic Tax Filers, Inc.
100 Efile Drive, Anytown, TX**Date **03/10/1999**Check if self-employed ☒Preparer's social security no. **999 : 06 : 0007**E.I. No. **110000011**ZIP Code **78621**

ALABAMA DEPARTMENT OF REVENUE
Corporation Income Tax ReturnCY ☐
FY ☒
SY ☐

1999

For the year January 1 – December 31, 1999, or other tax year beginning 02/01/1999, 1999, ending 01/31/2000.

Check applicable box: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change	FEDERAL BUSINESS CODE NUMBER ▶ 313000		FEDERAL EMPLOYER IDENTIFICATION NUMBER ▶ 110000001	
	NAME ▶ Help For All, Inc.			
	ADDRESS ▶ 31 Any Street			
	CITY, STATE, COUNTRY (IF NOT U.S.) ▶ Anytown, MD		9-DIGIT ZIP CODE ▶ 78621-0000	
	STATE OF INCORPORATION ▶ DE	DATE OF INCORPORATION 05/30/1983	DATE QUALIFIED IN ALABAMA 04/15/1997	NATURE OF BUSINESS IN ALABAMA Textile Mills
Does this company file as part of a consolidated Federal return? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, enter name and FEIN of common parent corporation. ▶ Name ▶ FEIN				
Will this corporation file as an S Corporation with the IRS next year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Was federal form 1120-REIT filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Filing Status: (see instructions) <input type="checkbox"/> 1. Corporation operating only in Alabama. <input checked="" type="checkbox"/> 2. Multistate Corporation – Apportionment (Sch. D-1). <input type="checkbox"/> 3. Multistate Corporation – Percentage of Sales (Sch. D-2). <input type="checkbox"/> 4. Multistate Corporation – Separate Accounting (Prior written approval required).				
Is this an Alabama Consolidated return? ▶ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Caution: see instructions)				

1	FEDERAL TAXABLE INCOME before net operating loss and special deductions.....	▶	1	-152,978
2	Reconciliation adjustments to Alabama basis (from line 37, Schedule A).....	▶	2	0
3	Total net income adjusted to Alabama basis (add lines 1 and 2) If you operated only in Alabama, omit lines 4 through 10c, and enter this amount on line 11	▶	3	-152,978
4	Net nonbusiness (income)/loss (from Column E, Schedule C)	▶	4	0
5	Special deductions (from line 10c below).....	▶	5	0
6	Apportionable income (add lines 3, 4, and 5).....	▶	6	-152,978
7	Alabama apportionment factor (from line 26, Schedule D-1)	▶	7	50.0000 %
8	Income apportioned to Alabama (multiply line 6 by line 7)	▶	8	-76,489
9	Net nonbusiness income/(loss) (from Column F, Schedule C)	▶	9	0
10	Special deductions:		CN	
	a Pollution control deduction (from line 4, Schedule B)	▶	10a	0
	b Expense of removing barriers to the handicapped from property in Ala.	▶	10b	0
	c Total special deductions (add lines 10a and 10b).....	▶	10c	0
11	Alabama income before federal income tax deduction (line 8 plus line 9 less line 10c).....	▶	11	-76,489
12	Federal income tax deduction /(refund) (from line 7, Schedule E)	▶	12	0
13	Alabama income before net operating loss (NOL) carryforward (line 11 less line 12)	▶	13	-76489.
14	Alabama NOL deduction (Do not exceed line 13 – attach schedule)	▶	14	0
15	Alabama taxable income (line 13 less line 14).....	▶	15	-76,489
16	ALABAMA INCOME TAX			
	a Income Tax (5% of line 15 or Schedule D-2, line 4).....	▶	16a	0
	b Consolidated Filing Fee (Schedule G).....	▶	16b	0
	c Total Tax (add lines 16a and 16b)	▶	16c	0
17	Tax Payments, Credits, Exemptions, and Deferral:			
	a 1999 estimated tax payments and amounts applied from 1998 return	▶	17a	0
	b Payments made with extension	▶	17b	0
	c Payments prior to adjustment (see instructions)	▶	17c	0
	d Credits/Exemptions (from line 7, Schedule F)	▶	17d	0
	e LIFO Reserve Tax Deferral (see instructions)	▶	17e	0
	f Total Payments, Credits, and Deferral (add lines 17a, 17b, 17c, 17d, and 17e).....	▶	17f	0
18	NET TAX DUE (subtract line 17f from line 16c).....	▶	18	0
19	OVERPAYMENT (subtract line 16c from line 17f)	▶	19	0
	a Amount to be credited to 2000 estimated tax	▶	19a	0
	b Contribution to Penny Trust Fund	▶	19b	0
	c Amount to be refunded	▶	19c	0
20	Penalty for late filing and/or late payment (see instructions)	▶	20	0
21	Interest due (Internal Revenue Code rate from unextended due date)	▶	21	0
22	TOTAL AMOUNT DUE (add lines 18, 20, and 21).....	▶	22	0
23	AMOUNT REMITTED WITH THIS RETURN	▶	23	0
	a If payment made through Electronic Funds Transfer (EFT), check this box	▶		

UNLESS A COPY OF THE
FEDERAL RETURN IS
ATTACHED, THIS
RETURN IS INCOMPLETE

Please
Sign Here

UNDER PENALTIES OF PERJURY, I declare that I have examined this return and accompanying schedules and statements and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your Signature **Roger Rabbit**Title **ChiefExecutive Officer**Date **4/15/2000**Paid
Preparer's
Use OnlyPreparer's signature **Johnny Applesseed**Date **04/10/2000**Check if self-employed ☒Preparer's social security no. **999 : 06 : 0007**Firm's name (or yours, if self-employed) and address
Tax Filers, Inc
100 Efile Drive, Anytown, TXE.I. No. **110000011**ZIP Code **78621**

SchD1OtherProperty.pdf

Help For All, Inc.

11-0000001

AL 20C TYE 12/31/2006

Statement #1

Form 20C Schedule D-1 Line 8

Other/Tangible Property

Description	Alabama BOY	Alabama EOY	Everywhere BOY	Everywhere EOY
Tools	\$71338.	\$94193.	\$199413.	\$319005.
Total	\$71338.	\$94193.	\$199413.	\$319005.

SCHEDULE

EZ

REV. 12/92

ALABAMA DEPARTMENT OF REVENUE

Alabama Enterprise Zone Credit Computation Schedule

For Tax Year

2006

For the calendar year indicated, or other tax year beginning 01/01/2006, ending 12/31/2006

Please read instructions before completing this schedule. Attach this schedule to your Alabama return. Also, you must attach a copy of Form ADECA-EZ1 issued by the Alabama Department of Economic and Community Affairs (ADECA) certifying your application.

NAME Help For All, Inc		FEIN / SSN 110000001
ADDRESS 31 Any Street		ADECA CERTIFICATION NO. 567567567
CITY Anytown	STATE MD	ZIP 786210000
Indicate If: <input type="checkbox"/> New Business <input checked="" type="checkbox"/> Existing Business		

Check the box that applies: ☐ Individual (Form 40 or 40NR) ☐ Partnership (Form 65) **NOTE: Partnerships and S corporations must also complete Schedule EZ-K1.**
☒ Corporation (Form 20 or 20F) ☐ S corporation (Form 20S)

PART I – GENERAL INCOME TAX CREDIT

The general income tax credit may be available for five consecutive years for corporations, partnerships, and proprietorships provided that 30 percent of the new permanent employees were formerly unemployed for at least 90 days prior to this employment. The amount of state income tax credit allowed on taxes due from zone operations is as follows: (Check the box which applies and enter the percentage on line 6.)

☐ 1st Year – 80% ☐ 2nd Year – 60% ☐ 3rd Year – 40% ☒ 4th Year – 20% ☐ 5th Year – 20%

- 1 Enter the total number of new permanent employees hired.
- 2 Enter the number of employees shown on line 1 that were unemployed for at least 90 days prior to employment.
- 3 Divide the number on line 2 by the number on line 1.

1	97
2	24
3	24 %

If line 3 is 30% or more continue with lines 4 through 7

- 4 Enter the net income derived from Enterprise Zone Operations. Partnerships and S corporations must distribute this income to partners and shareholders and therefore should not complete lines 5, 6, and 7.
- 5 Enter the **additional** Alabama tax due as a result of including the Alabama enterprise zone income shown on line 4 above in your adjusted gross income. (See the instructions for this computation).
- 6 Enter the percentage next to the box you checked above (80%, 60%, 40% or 20%).
- 7 **Maximum General Income Tax Credit.** Multiply the amount on line 5 by the percentage on line 6. Enter here and also on line 6, Part IV.

4	
---	--

5		
6	X	%
7		

PART II – CREDIT FOR TRAINING NEW EMPLOYEES

This credit is available for the expenses of training new employees in new skills. The maximum credit is \$1,000 per employee. A new employee must be an employee as defined in the instructions for eligibility for the general income tax credit and cannot be an unpaid volunteer worker. Additionally, the training expenses must be for new skills and not skills in which the employee is already trained. The training given **must** be in accordance with approved guidelines of the Alabama Department of Economic and Community Affairs.

- 1 Maximum credit allowed for each employee.
- 2 Enter the total number of new employees hired since this business qualified under the Alabama Enterprise Zone Act.
- 3 **Total Maximum Credit.** Multiply line 1 by line 2.
- 4 If you claimed a credit for these expenses in a previous Alabama return, enter the total amount claimed for all previous years.
- 5 Subtract line 4 from line 3.
- 6 Enter the actual direct training expenses of the employees shown on line 2 above.
- 7 **Credit for Training New Employees.** Compare the amounts on lines 5 and 6 and enter the smaller amount here and also on line 7, Part IV.

1	1,000	00
2	X	97.
3	97,000	
4	34,839	
5	62,161	
6	74,865	
7	62,161	

PART III – CREDIT FOR NEW INVESTMENTS

This credit is available for new investments in the designated enterprise zone or improvements to existing facilities in the zone provided that at least five (5) new permanent employees are first hired. These new permanent employees must be as defined in the instructions and cannot include unpaid volunteer workers. The credit is based on the amount invested. New investment is defined to be a capital investment within the designated zone and at the place of employment of the new permanent employee.

1 Enter the total number of new permanent employees **97** (If less than five, do not complete lines 2, 3, and 4.)

2 Enter the total amount expended for new investments or for improvements to an existing business in the designated enterprise zone

2 150,000

3 Maximum Credit Computation:

a. 10% on first \$10,000 invested

3a 1,000

b. 5% on next \$90,000 invested

3b 4,500

c. 2% on remaining investment

3c 1,000

4 **Total.** Add lines 3a, 3b, and 3c. Enter result here and also on line 8, Part IV

4 \$ 6,500

PART IV – SUMMARY

1 Maximum incentive credit allowable for each new permanent employee

1 2,500 00

2 Number of new permanent employees

2 X 97

3 Maximum credit available. Multiply line 1 by line 2

3 242,500

4 Less enterprise zone credits earned in a previous year whether claimed or not in a previous year's return

4 150,000

5 Maximum credit available this year. Subtract line 4 from line 3

5 92,500

6 General income tax credit from line 7, Part I

6 0

7 Credit for expenses of training new employees from line 7, Part II

7 62,161

8 Credit for new investments from line 4, Part III

8 6,500

9 Total. Add lines 6, 7, and 8

9 68,661

10 **Total Credit Earned This Year.** Compare the amounts on lines 5 and 9 and enter the smaller amount here

10 68,661

11 Enter the tax due as shown on return after applying (a) credit for taxes paid other states, (b) unused enterprise zone credits from two preceding years, and/or (c) any other credits. (See instructions for the order in which these credits should be applied.)

11 251,744

12 **CREDIT AVAILABLE THIS YEAR.** Compare the amounts on lines 10 and 11 and enter the smaller amount here

12 68,661

13 **Indicate below the amount of Enterprise Zone Credit claimed in each return:**

TYPE OF RETURN	(a) 2nd preceding year carry-over credit	(b) 1st preceding year carry-over credit	(c) Current year credit from line 12 above	(d) Total credit claimed this year (add columns a, b, & c)
Form 40 or Form 40NR Individual Income Tax Return				
Form 20 or Form 20F Corporate Income Tax Return	0	0	68,661	68,661
Form FT2-1 Domestic Corp. Franchise Tax Return, Permit Application And Annual Report				
Form FT1-1 Foreign Corp. Franchise Tax Return, Permit Application And Annual Report				
Form FT2-1N Initial Domestic Corporation Franchise Tax Return, Permit Application And Annual Report				

14 **Totals.** Add the amounts in columns b and c. The amount in column c should not be more than the amount on line 12 above. If line 10 above exceeds lines 14, column c, complete Part V to figure the current year carry-over credit

14 0 68,661

The amounts in column d above should be entered on the appropriate line of each type return.

PART V – CARRY-OVER CREDIT**Prior Year Credit**

1 Enter the enterprise zone credit as shown on line 6, Part V of Schedule EZ for the preceding tax year

1 0

2 Enter the amount shown on line 14, column b, Part IV above

2 0

3 **PRIOR YEAR CARRY-OVER CREDIT.** Subtract line 2 from line 1. This amount may be carried over to the next succeeding tax year only. (See instructions)

3 0

Current Year Credit

4 Enter the amount from line 10, Part IV above

4 68,661

5 Enter the amount from line 14, column c, Part IV above

5 68,661

6 **CURRENT YEAR CARRY-OVER CREDIT.** Subtract line 5 from line 4. This amount may be carried over to the next two succeeding years or until used up, whichever comes first

6 0

EmployerEducationCreditFund.pdf

Employer Education Credit Fund calculations (if applicable)

This pdf should include a copy of the document of approval along with a detailed schedule computing the credit.

For sample purposes this document will represent:

copy of approval document

detailed schedule computing credit

IncomeTaxCredit.pdf

Income Tax Credit calculations (if applicable)

This pdf should include certificate/document of approval, computation of income generated from project, support for amount paid, and computation of the credit.

For sample purposes this document will represent:

copy of certificate/document of approval

computation of income generated from project

supporting documentation for amount paid

computation of the credit

TaxIncrementFundPaymentCredit.pdf

Tax Increment Fund Payment Credit calculations (if applicable)

This pdf should include a copy of the document of approval with proof of payment(s) into the fund relative to corporate income tax and a detailed schedule computing income generated from the project.

For sample purposes this document will represent:

copy of approval document

proof of payment(s) into the fund relative to corporate income tax

detailed schedule computing income generated from the project

CoalTaxCredit.pdf

Coal Tax Credit calculations (if applicable)

This pdf should include a detailed schedule computing the coal tax credit.

For sample purposes this document will represent:

a detailed schedule computing the coal tax credit

12/97
**FORM
AR**ALABAMA DEPARTMENT OF REVENUE
Annual Report of Project for Capital Credit

For the tax year beginning 2006

and ending 2006

Attach a separate form to the income tax return for each project.

This form is used for reporting to the Alabama Department of Revenue that the required conditions entitling the investing company or companies to the capital credit as provided by Section 40-18-190 through Section 40-18-203, *Code of Alabama 1975* have been met throughout the period claimed. A project entity completing and filing this form with the project entity's income tax return is stating that the project entity is in compliance with the conditions required to qualify for the capital credit throughout the current tax period.

PART I — IDENTIFICATION OF PROJECT

Project Number: 2002173001

Project Entity: Help For All, Inc.

FEIN: 110000001

SIC Code: 561440

Address: 31 Any Street

Telephone No.: (703) 555-1212

City: Anytown

State: MD

ZIP: 78621-0000

Project Filing Status: (✓ only one) ☐ LLC ☐ Sole Proprietorship ☒ C Corporation ☐ S Corporation ☐ Estate ☐ PartnershipType Of Project: ☐ New Project ☐ Expansion Project ☒ Small Business Addition ☐ Headquarters Facility

Date Project Was Placed In Service: 06/01/2001

PART II — REPORT OF ANNUAL PROJECT STATUS

1. Number Of New Employees Employed By This Project: 164
2. Average Hourly Wage For New Employees Employed By This Project: \$8.75 hour
3. Average Hourly Compensation Including Benefits For New Employees Employed By This Project: \$10.25
4. Have Minimum Employee And Base Wage Requirements Been Met For Current Year: ☒ Yes ☐ No
5. Total Number of Years Employee And Wage Requirements Have Not Been Met: None

PART III — PROJECT STATUS

1. Total Actual Project Costs As Reported On Form INT-2, Line 6.....	1	73,937	
2. Capital Credit Available For This Tax Year (Line 1 x 5%) <input type="checkbox"/> Short Year <input type="checkbox"/> Part Year.....	2	43,511	
3. Total Project Entity's Income Apportioned To Alabama.....	3	30,426	
4. Project Apportionment Factor From Part IV, Line 26.....	4	100.0000	%
5. Total Income Apportioned To Project In Alabama.....	5	30,426	
6. Nonbusiness Income/(loss) Allocated To The Project In Alabama.....	6		
7. Special Deductions Allocated To The Project In Alabama.....	7		
8. Total Project Income Allocated And Apportioned To Alabama.....	8	30,426	

Under penalties of perjury, I declare that I am duly authorized to complete this form and that I have listed all the recipients. I have examined the above statements and to the best of my knowledge and belief they are true, correct, and complete.

Your Signature: *Charles R. Jones*

Title: Asst. Sec.

Date: 01/15/2007

PART IV — APPORTIONMENT FACTORS

TANGIBLE PROPERTY AT COST FOR PRODUCTION OF BUSINESS INCOME	PROJECT		ALABAMA	
	BEGINNING OF YEAR	END OF YEAR	BEGINNING OF YEAR	END OF YEAR
1 Inventories				
2 Land				
3 Furniture And Fixtures				
4 Machinery And Equipment	2,196,225.00	2,221,354.00	2,196,225.00	2,221,354.00
5 Buildings And Leasehold Improvements				
6 IDB/IRB Property (at Cost)				
7 Government Property (at FMV)				
8				
9 Less Construction In Progress (if included)				
10 Totals	2,196,225.00	2,221,354.00	2,196,225.00	2,221,354.00
11 Average Owned Property (BOY + EOY ÷ 2)		2,208,789.50		2,208,789.50
12 Annual Rental Expense	\$ 492,060.00	\$ 3,936,480.00	492,060.00	3,936,480.00
13 Total Average Property		13a 6,145,269.50		13b 6,145,269.50
14 Project Property Factor — 13a ÷ 13b = Line 14				14 ► 100.0000 %
SALARIES, WAGES, COMMISSIONS AND OTHER COMPENSATION RELATED TO THE PRODUCTION OF BUSINESS INCOME	15a PROJECT	15b ALABAMA	15c	
15 Project Payroll Factor — 15a ÷ 15b = 15c	6,424,055.00	6,424,055.00	► 100. %	
SALES	PROJECT	ALABAMA		
16 Destination Sales (see instructions)				
17 Origin Sales (see instructions)				
18 Total Gross Receipts From Sales				
19 Dividends				
20 Interest				
21 Rents				
22 Royalties				
23 Gross Proceeds From Capital And Ordinary Gains				
24 Other (Federal 1120, Line)	15,773,363.00	15,773,363.00		
25 Project Sales Factor — 25a ÷ 25b = Line 25c	25a 15,773,363.00	25b 15,773,363.00	25c ► 100. %	
26 Sum Of Lines 14, 15c, And 25c ÷ 3 = PROJECT APPORTIONMENT FACTOR (Enter here and on Part III, Line 4, Page 1)			26	► 100.0000 %

Instructions For Preparing Annual Report of Project (Form AR)

GENERAL INSTRUCTIONS

This form is used to report to the Alabama Department of Revenue that the conditions required to entitle the project entity to the capital credit as provided by Section 40-18-190 through Section 40-18-203, *Code of Alabama 1975* have been met throughout the period for which the capital credit is claimed. This form shall be filed annually by the project entity stating that the project was, throughout the current tax period for which the capital credit is claimed, in compliance with the conditions required to be met in order to qualify the project for the capital credit and that the sum of all the capital credits utilized to date when added to the capital credit claimed for the current year, does not exceed the capital costs for the qualifying project.

This form is to be attached to the income tax return of the project entity. A separate form should be completed for each project. If you have any questions pertaining to this form and you are filing a corporate income tax return, please call (334) 234-1200. If you are filing a partnership, estate, or individual income tax return, please call (334) 242-1000.

For tracking purposes, the project entity **must** attach a copy of the current allocation of credit schedule as filed with the Form INT, INT-3, or INT-4, whichever is applicable. If the credit flows through one of these entities, list all the eventual recipients of the capital credit for the current tax year on this schedule. For example, if one of the investing companies of a project is a partnership, all partners in the partnership eligible for the capital credit must be listed. Failure to remit this information may delay the processing of the income tax return(s) of any or all recipients of the capital credit.

LINE BY LINE INSTRUCTIONS

Project Number – Enter the number assigned by the Alabama Department of Revenue when the initial report of intent to invest (Form INT) was filed. This number must be on all correspondence with the Department pertaining to the capital project.

Project Entity – Enter the name of the entity receiving the credit. If the qualifying project is a joint venture, a legal project entity must be created in order for the investing companies to receive the capital credit.

Address – Enter the address to which all correspondence regarding this project should be sent.

FEIN – Enter the Federal Employer Identification Number.

SIC Code – Enter the Standard Industrial Classification Code of the project as published by the United States Government Office of Management and Budget.

Project Filing Status – Check the applicable box.

Type of Project – Indicate whether this project is a new project, expansion project, small business addition, or a headquarters facility.

New Project -- A project with capital costs which are not less than \$2,000,000, and at which the predominant trade or business activity conducted will constitute industrial, warehousing, or research activity.

Expansion Project – An expansion of an existing business in Alabama with capital costs which are not less than \$2,000,000, and at which the predom-

12/97
FORM
K-RCC

ALABAMA DEPARTMENT OF REVENUE
Recipient's Share of Capital Credit

For the tax year beginning 1/1/2006, and ending 12/31/2006

THIS FORM MUST BE ATTACHED TO RECIPIENT'S INCOME TAX RETURN TO RECEIVE THE CAPITAL CREDIT AVAILABLE.

THE CAPITAL CREDIT AVAILABLE TO RECIPIENT WILL BE DISALLOWED IF FORM K-RCC IS NOT ATTACHED.

NOTE: If the project is a joint venture, lines 4 and 7 will be completed by the recipient and lines 1-3, 5 and 6 will be completed by the project entity or distributing entity. If the project is not a joint venture, the project entity must complete lines 1-7 and the recipient's percentage of allocation will be 100%.

Project No.: 2002173001 Recipient's Name: Help For All, Inc. FEIN or Soc. Sec. No.: 110000001

Address: 31 Any Street

City: Anytown State: MD ZIP: 78621-0000

Project Entity: Golden Service, Inc Telephone No.: (800) 756-2424

Address: 40 Any Street

City: Anytown, State: MD ZIP: 78621-0000

1. Total project income allocated to Alabama.	1	30,426.00	
2. Recipient's percentage (%) of allocation	2	100.0000	%
3. Recipient's Share of Project income in Alabama (multiply line 1 by line 2)	3	30426.	
4. Recipient's Alabama Tax Liability generated by Project income: <input checked="" type="checkbox"/> With/without method <input type="checkbox"/> Allocation method	4		
5. Capital Credit Available for this Tax Year.	5	30426	
6. Recipient's Share of Capital Credit Available for this Tax Year (multiply line 5 by line 2)	6	30426	
7. Capital Credit Eligible to be applied to recipient's tax liability (enter the lesser of line 4 and line 6)	7	30426	

Under penalties of perjury, I declare that I am duly authorized to complete this form and to the best of my knowledge and belief, the project was throughout the period for which the capital credit is claimed in compliance with the conditions required to be met in order to qualify the project for the capital credit and the sum of all capital credits utilized to date when added to the capital credit claimed in the current return, do not exceed the capital costs of the qualifying project. I understand that if this affidavit is not fully executed, completed, and notarized this credit will be disallowed by the Alabama Department of Revenue.

Roger Rabbit
Signature of Recipient:

SWORN TO AND SUBSCRIBED before me

Signature:

this 31 day of December, 2006

Susan Swan
Notary Public (seal also required)

Form **1120**
Department of the Treasury
Internal Revenue Service (77)

U.S. Corporation Income Tax Return

OMB No. 1545-0123

For calendar year 2006 or tax year beginning , 2006, ending , 20
▶ See separate instructions.

2006

A Check if:

- 1 Consolidated return (attach Form 851) ☐
2 Personal holding co. (attach Sch. PH) ☐
3 Personal service corp. (see instructions) ☐
4 Schedule M-3 required (attach Sch. M-3) ☒

Use IRS label. Otherwise, print or type.

Name

Help For All, Inc

Number, street, and room or suite no. If a P.O. box, see instructions.

31 Any Street

City or town, state, and ZIP code

Anytown, MD 20901

B Employer identification number

11

0000001

C Date incorporated

05/30/1983

D Total assets (see instructions)

\$ 3,751,608,959 00

E Check if: (1) ☐ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change

Income	1a	Gross receipts or sales	684,525	00	b	Less returns and allowances		c	Bal	▶	1c	684,525	00
	2	Cost of goods sold (Schedule A, line 8)									2	219,245	00
	3	Gross profit. Subtract line 2 from line 1c									3	465,280	00
	4	Dividends (Schedule C, line 19)									4		
	5	Interest									5	8,018,387	00
	6	Gross rents									6	265,386	00
	7	Gross royalties									7		
	8	Capital gain net income (attach Schedule D (Form 1120))									8	11,802,202	00
	9	Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)									9		
	10	Other income (see instructions—attach schedule)									10	375,018,745	00
	11	Total income. Add lines 3 through 10									11	395,570,000	00
Deductions (See instructions for limitations on deductions.)	12	Compensation of officers (Schedule E, line 4)									12	1,000,000	00
	13	Salaries and wages (less employment credits)									13	6,753,221	00
	14	Repairs and maintenance									14	225,729	00
	15	Bad debts									15		
	16	Rents									16		
	17	Taxes and licenses									17	7,621,914	00
	18	Interest									18	2,716,219	00
	19	Charitable contributions									19		
	20	Depreciation from Form 4562 not claimed on Schedule A or elsewhere on return (attach Form 4562)									20	8,961,357	00
	21	Depletion									21		
	22	Advertising									22		
	23	Pension, profit-sharing, etc., plans									23	25,701	00
	24	Employee benefit programs									24	5,149	00
	25	Domestic production activities deduction (attach Form 8903)									25		
	26	Other deductions (attach schedule)									26	229,321,851	00
	27	Total deductions. Add lines 12 through 26									27	256,631,141	00
	28	Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11									28	138,938,859	00
	29	Less: a Net operating loss deduction (see instructions)				29a					29c		
	b Special deductions (Schedule C, line 20)				29b								
Tax and Payments	30	Taxable income. Subtract line 29c from line 28 (see instructions)									30	138,938,859	00
	31	Total tax (Schedule J, line 10)									31	44,976,265	0
	32a	2005 overpayment credited to 2006	32a										
	b	2006 estimated tax payments	32b	45,000,000	00								
	c	2006 refund applied for on Form 4466	32c	()							
	e	Tax deposited with Form 7004				32d	45,000,000	00					
	f	Credits: (1) Form 2439 (2) Form 4136				32e							
	g	Credit for federal telephone excise tax paid (attach Form 8913)				32f							
						32g	45,000,000	00			32h		
	33	Estimated tax penalty (see instructions). Check if Form 2220 is attached									33		
	34	Amount owed. If line 32h is smaller than the total of lines 31 and 33, enter amount owed									34		
	35	Overpayment. If line 32h is larger than the total of lines 31 and 33, enter amount overpaid									35	23,735	00
36	Enter amount from line 35 you want: Credited to 2007 estimated tax ▶ Refunded ▶									36	23,735	00	

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Roger Rabbit

01/25/2007

Chief Executive Officer

Signature of officer

Date

Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer's Use Only

Preparer's signature

Johnny Appleseed

Date

01/20/2007

Check if self-employed ☒

Preparer's SSN or PTIN

999-06-0007

Firm's name (or yours if self-employed), address, and ZIP code

Electronic Tax Filers, Inc

100 Efile Drive, Anytown, TX 78621

EIN 11

0000011

Phone no. (512)

555-1212

Schedule A Cost of Goods Sold (see instructions)

1	Inventory at beginning of year	1	75,770	00
2	Purchases	2	67,390	00
3	Cost of labor	3	97,390	00
4	Additional section 263A costs (attach schedule)	4	19,676	00
5	Other costs (attach schedule)	5	53,778	00
6	Total. Add lines 1 through 5	6	313,921	00
7	Inventory at end of year	7	94,676	00
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on page 1, line 2	8	219,245	00

9a Check all methods used for valuing closing inventory:

(i) ☒ Cost

(ii) ☐ Lower of cost or market

(iii) ☐ Other (Specify method used and attach explanation.) ►

b Check if there was a writedown of subnormal goods ☐

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ☐

d If the LIFO inventory method was used for this tax year, enter percentage (or amounts) of closing inventory computed under LIFO **9d**

e If property is produced or acquired for resale, do the rules of section 263A apply to the corporation? ☒ Yes ☐ No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation ☐ Yes ☒ No

Schedule C Dividends and Special Deductions (see instructions)

	(a) Dividends received	(b) %	(c) Special deductions (a) × (b)
1 Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		70	
2 Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		80	
3 Dividends on debt-financed stock of domestic and foreign corporations		see instructions	
4 Dividends on certain preferred stock of less-than-20%-owned public utilities		42	
5 Dividends on certain preferred stock of 20%-or-more-owned public utilities		48	
6 Dividends from less-than-20%-owned foreign corporations and certain FSCs		70	
7 Dividends from 20%-or-more-owned foreign corporations and certain FSCs		80	
8 Dividends from wholly owned foreign subsidiaries		100	
9 Total. Add lines 1 through 8. See instructions for limitation			
10 Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11 Dividends from affiliated group members		100	
12 Dividends from certain FSCs		100	
13 Dividends from foreign corporations not included on lines 3, 6, 7, 8, 11, or 12			
14 Income from controlled foreign corporations under subpart F (attach Form(s) 5471)			
15 Foreign dividend gross-up			
16 IC-DISC and former DISC dividends not included on lines 1, 2, or 3			
17 Other dividends			
18 Deduction for dividends paid on certain preferred stock of public utilities			
19 Total dividends. Add lines 1 through 17. Enter here and on page 1, line 4			
20 Total special deductions. Add lines 9, 10, 11, 12, and 18. Enter here and on page 1, line 29b			

Schedule E Compensation of Officers (see instructions for page 1, line 12)

Note: Complete Schedule E only if total receipts (line 1a plus lines 4 through 10 on page 1) are \$500,000 or more.

(a) Name of officer	(b) Social security number	(c) Percent of time devoted to business	Percent of corporation stock owned		(f) Amount of compensation
			(d) Common	(e) Preferred	
1 Robert Fleece	123-45-6789	100 %	10 %	%	1,000,000
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
2 Total compensation of officers					1,000,000
3 Compensation of officers claimed on Schedule A and elsewhere on return					
4 Subtract line 3 from line 2. Enter the result here and on page 1, line 12					1,000,000

Schedule J Tax Computation (see instructions)

1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120))	<input type="checkbox"/>			
2	Income tax. Check if a qualified personal service corporation (see instructions)	<input type="checkbox"/>	2	48,628,601	00
3	Alternative minimum tax (attach Form 4626)		3	0	00
4	Add lines 2 and 3		4	48,628,601	00
5a	Foreign tax credit (attach Form 1118)		5a		
b	Qualified electric vehicle credit (attach Form 8834)		5b		
c	General business credit. Check applicable box(es): <input checked="" type="checkbox"/> Form 3800 <input type="checkbox"/> Form 6478 <input type="checkbox"/> Form 8835, Section B <input type="checkbox"/> Form 8844		5c	3,652,336	
d	Credit for prior year minimum tax (attach Form 8827)		5d		
e	Bond credits from: <input type="checkbox"/> Form 8860 <input type="checkbox"/> Form 8912		5e		
6	Total credits. Add lines 5a through 5e		6	3,652,336	
7	Subtract line 6 from line 4		7	44,976,265	
8	Personal holding company tax (attach Schedule PH (Form 1120))		8		
9	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Form 8902 <input type="checkbox"/> Other (attach schedule)		9		
10	Total tax. Add lines 7 through 9. Enter here and on page 1, line 31		10	44,976,265	

Schedule K Other Information (see instructions)

	Yes	No		Yes	No
1	Check accounting method: a <input type="checkbox"/> Cash b <input checked="" type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶		7	At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of stock of the corporation entitled to vote or (b) the total value of all classes of stock of the corporation?	<input checked="" type="checkbox"/>
2	See the instructions and enter the:			If "Yes," enter: (a) Percentage owned ▶	
a	Business activity code no. ▶ 313000			and (b) Owner's country ▶	
b	Business activity ▶ Textile		c	The corporation may have to file Form 5472 , Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter number of Forms 5472 attached ▶	
c	Product or service ▶ Textile		8	Check this box if the corporation issued publicly offered debt instruments with original issue discount <input type="checkbox"/>	
3	At the end of the tax year, did the corporation own, directly or indirectly, 50% or more of the voting stock of a domestic corporation? (For rules of attribution, see section 267(c).)	<input checked="" type="checkbox"/>		If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.	
	If "Yes," attach a schedule showing: (a) name and employer identification number (EIN), (b) percentage owned, and (c) taxable income or (loss) before NOL and special deductions of such corporation for the tax year ending with or within your tax year.		9	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$	
4	Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?	<input checked="" type="checkbox"/>	10	Enter the number of shareholders at the end of the tax year (if 100 or fewer) ▶	
	If "Yes," enter name and EIN of the parent corporation ▶		11	If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here <input type="checkbox"/>	
5	At the end of the tax year, did any individual, partnership, corporation, estate, or trust own, directly or indirectly, 50% or more of the corporation's voting stock? (For rules of attribution, see section 267(c).)	<input checked="" type="checkbox"/>		If the corporation is filing a consolidated return, the statement required by Temporary Regulations section 1.1502-21T(b)(3) must be attached or the election will not be valid.	
	If "Yes," attach a schedule showing name and identifying number. (Do not include any information already entered in 4 above.) Enter percentage owned ▶		12	Enter the available NOL carryover from prior tax years (Do not reduce it by any deduction on line 29a.) ▶ \$	
6	During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? (See sections 301 and 316.)	<input checked="" type="checkbox"/>	13	Are the corporation's total receipts (line 1a plus lines 4 through 10 on page 1) for the tax year and its total assets at the end of the tax year less than \$250,000?	<input checked="" type="checkbox"/>
	If "Yes," file Form 5452 , Corporate Report of Nondividend Distributions.			If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2 on page 4. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the tax year. ▶ \$	
	If this is a consolidated return, answer here for the parent corporation and on Form 851 , Affiliations Schedule, for each subsidiary.				

Note: If the corporation, at any time during the tax year, had assets or operated a business in a foreign country or U.S. possession, it may be required to attach **Schedule N (Form 1120)**, *Foreign Operations of U.S. Corporations*, to this return. See *Schedule N* for details.

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		940,348,325		375,724,013
2a	Trade notes and accounts receivable	1,675,642		115,679,010	
b	Less allowance for bad debts	(2,000)	1,673,642	(2,083)	115,676,927
3	Inventories		75,770		94,676
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (attach schedule)		6,272,210		5,201,156
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach schedule)		1,170,917,682		1,230,810,633
10a	Buildings and other depreciable assets	320,264,517		346,364,576	
b	Less accumulated depreciation	(115,865,855)	204,398,662	(138,886,967)	207,477,609
11a	Depletable assets				
b	Less accumulated depletion	()		()	
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)	2,050,521,992		2,078,314,078	
b	Less accumulated amortization	(257,037,784)	1,793,484,208	(261,690,133)	1,816,623,945
14	Other assets (attach schedule)				
15	Total assets		4,117,170,499		3,751,608,959
Liabilities and Shareholders' Equity					
16	Accounts payable		22,075,720		20,596,725
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach schedule)		829,763,902		470,253,285
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach schedule)		962,818,384		1,173,826,771
22	Capital stock: a Preferred stock	308,500,000		308,500,000	
	b Common stock	17,680,774	326,180,774	17,513,891	326,013,891
23	Additional paid-in capital		675,611,707		675,611,707
24	Retained earnings—Appropriated (attach schedule)				
25	Retained earnings—Unappropriated		1,300,720,012		1,085,306,580
26	Adjustments to shareholders' equity (attach schedule)				
27	Less cost of treasury stock		()		()
28	Total liabilities and shareholders' equity		4,177,170,499		3,751,608,959

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return

Note: Schedule M-3 required instead of Schedule M-1 if total assets are \$10 million or more—see instructions

1	Net income (loss) per books		7	Income recorded on books this year not included on this return (itemize):	
2	Federal income tax per books			Tax-exempt interest \$	
3	Excess of capital losses over capital gains				
4	Income subject to tax not recorded on books this year (itemize):				
5	Expenses recorded on books this year not deducted on this return (itemize):		8	Deductions on this return not charged against book income this year (itemize):	
a	Depreciation \$		a	Depreciation \$	
b	Charitable contributions \$		b	Charitable contributions \$	
c	Travel and entertainment \$				
6	Add lines 1 through 5		9	Add lines 7 and 8	
			10	Income (page 1, line 28)—line 6 less line 9	

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)

1	Balance at beginning of year	1,300,720,012	5	Distributions: a Cash	1,204,763,902
2	Net income (loss) per books	67,250,945		b Stock	
3	Other increases (itemize):			c Property	
			6	Other decreases (itemize):	822,718,261
		1,804,817,786	7	Add lines 5 and 6	2,087,482,163
4	Add lines 1, 2, and 3	3,172,788,743	8	Balance at end of year (line 4 less line 7)	1,085,306,580

